

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	ll	907	9-7-01

BEST AVAILABLE COPY

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 + Restricted O Objected

Claim	Date	Claim	Date	Claim	Date
Original		Final		Final	
1		51	5/16	101	
2		52	5/16	102	
3		53	5/16	103	
4		54	5/16	104	
5		55	5/16	105	
6		56	5/16	106	
7		57	5/16	107	
8		58	5/16	108	
9		59	5/16	109	
10		60	5/16	110	
11		61	5/16	111	
12		62	5/16	112	
13		63	5/16	113	
14		64	5/16	114	
15		65	5/16	115	
16		66	5/16	116	
17		67	5/16	117	
18		68	5/16	118	
19		69	5/16	119	
20		70	5/16	120	
21		71	5/16	121	
22		72	5/16	122	
23		73	5/16	123	
24		74	5/16	124	
25		75	5/16	125	
26		76	5/16	126	
27		77	5/16	127	
28		78	5/16	128	
29		79	5/16	129	
30		80	5/16	130	
31		81	5/16	131	
32		82	5/16	132	
33		83	5/16	133	
34		84	5/16	134	
35		85	5/16	135	
36		86	5/16	136	
37		87	5/16	137	
38		88	5/16	138	
39		89	5/16	139	
40		90	5/16	140	
41		91	5/16	141	
42		92	5/16	142	
43		93	5/16	143	
44		94	5/16	144	
45		95	5/16	145	
46		96	5/16	146	
47		97	5/16	147	
48		98	5/16	148	
49		99	5/16	149	
50		100	5/16	150	

If more than 150 claims or 10 actions
 staple additional sheet here

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